

SECTION OVERVIEW

This section focuses on intake, or the point of entry for a family. The information in this section will assist staff in understanding the procedures throughout the entire intake process, from initial contact with the Child Abuse and Neglect Hotline Unit (CANHU), through the process of an investigation or family assessment. Completing a thorough family assessment or investigation will help staff identify the service needs of the family.

CHAPTER OVERVIEW

This chapter covers information pertaining to the initial contact with CANHU when reporting abuse or neglect.

- 1.1 Child Abuse/Neglect Reports
- 1.2 Child Abuse/Neglect Referrals
- 1.3 Mandated Reporter Referrals
- 1.4 Newborn Crisis Assessments
- 1.5 Non-Caretaker Referrals
- 1.6 Preventive Services Referrals
- 1.7 Miscellaneous Referrals
 - 1.7.1 Missing Child
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 - 1.7.3 Death or Serious Injury
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 - 1.7.5 Duplicate Reports
- 1.8 Determine Most Appropriate County for Investigation

Attachment A: Information Obtained from the Reporter by CANHU

Attachment B: Investigations Involving a Conflict of Interest

Attachment C: Transfer of Reports

Attachment D: Emergency Investigation Criteria

1.1 Child Abuse/Neglect Reports

The Child Abuse/Neglect Hotline Unit (CANHU) shall receive a call or letter with allegation of child abuse/neglect. CANHU will interview reporter and collect enough information to determine if the allegations should be categorized as the following:

- A report of child abuse or neglect;
- Mandated reporter referral;
- A physician/health care provider requests a "Newborn Crisis Assessment".

Related Subject: Chapter 5.4, of this section, Newborn Crisis Assessment.

- A non-caretaker referral;
- A possible preventive services referral;
- A Non-CA/N child fatality; or
- Other.

At the time of the report, CANHU will inform the Mandated Reporter whether the information taken will be accepted as a hotline report or will be sent to the county office as a referral.

1.2 CHILD ABUSE/NEGLECT REFERRALS

Non CA/N Referrals: Calls made to the Child Abuse or Neglect Hotline do not always meet the statutory requirement of a CA/N Report. Most of these calls fall into the Non CA/N Referral category.

If the following criteria exist, the information does not meet the legal definition of a CA/N “report” and will be forwarded to the county as a referral.

- Alleged victim is child is age 18 or over and in CD custody;
- Care, custody, and control is not established;
- No specifics as to abuse/neglect; no adverse action to child;
- No identifiable information regarding location of child or family;
- Drug exposed infant;
- Non-CA/N child fatality (STAT only)

It is understood that a Children’s Service Worker’s (CSW) response to a referral may involve several contacts and responses. These responses range from a single contact with the reporter, to making the referral a “from” hotline report back to the CANHU, to actual removal of a child. County staff will record and enter into the CA/N automated system all actions taken by the Children’s Service Worker.

Actions taken by the Children’s Service Worker may include:

- Contact with the reporter, shared information;
- Call/contact with the family only;
- Home visit with the family;

- Call/contact with law enforcement/juvenile office;
- Contact with Bureau of Special Health Care Needs (BSHCN);
- Children's Division (CD) linkage of family to community resources;
- Result in open FCS case;
- Result in formal CA/N report ("From" report);
- Result in formal CA/N report (adverse affect on other household children who were not originally listed on referral);
- Collateral contact;
- Meeting with parent and child at hospital;
- Child taken into custody - placed in Alternative Care (safety issues);
- Child taken into custody - non-CA/N situation – parent is incapacitated due to illness or mental health concerns;
- Child placed in Alternative Care (beyond parental control); and
- Other (explain in comments).

1.3 MANDATED REPORTER REFERRALS

The purpose of Mandated Reporter Referrals is to help other professionals connect families with support services in the community. As a result, the Division will only accept as "M" referrals those called which relate to a familial situation, including foster/adoptive parents for the Division.

These will be transmitted as "M" referrals through the child abuse/neglect system from a mandated reporter with concerns regarding a family, but no specific incident of abuse or neglect. The reporter will be advised by CANHU that the information is not being accepted as a CA/N report, but a referral is being made to the county office. All reports alleging abuse of a child under 18 years of age where there is no care, custody or control are classified as N-referrals.

Note: If a mandated reporter referral is accepted locally the referral shall be registered in the automated system by contacting CANHU to set up a "from" report ("m-referral). *This should be done only if additional steps are taken beyond contact/discussion with the reporter.*

The county staff will contact the reporter within three (3) working days or the next working day on a referral received on the weekend or holiday, unless information indicates an emergency situation such as a child is threatening suicide, in which case the mandated reporter should be contacted as soon as possible. Discuss the situation with the mandated reporter and determine the most appropriate response. Upon completion, M-referrals must be updated in the CA/N system to reflect "actions taken". Possible M-referral "actions taken" are as follows:

- A. The mandated reporter is made aware of appropriate community resources and can provide referrals for the family.
- B. The reporter or CD staff may contact the family by telephone to assist the family in making appropriate referrals.
- C. CD staff may contact the family to obtain additional information and assess the needs of the family. If interviews of the children are necessary they should be conducted with the permission of the parent/guardian. However, in some rare situations (e.g. a child is threatening suicide and the reporter believes it is not in the child's best interest to contact the parents) and interview with the child without parental permission may be appropriate. The interview should take place with the reporter and the reasons for not contacting the parents thoroughly documented.
- D. Documentation of actions taken by staff relating to an "M" referral should include the result of the contact with the reporter, subsequent actions taken with the family, if any, and summary of the activities. The documentation can be handwritten and filed in a manner that allows county staff to access this information during the period prior to expungement. No formal case record must be set up unless the division decides to open a family for services.

Related Subject: Section 5, Chapter 4.1.3, Mandate Reporter Referrals

- E. CD staff may determine that, based upon additional information, a CA/N report and investigation is necessary.
- F. Referrals received on families with an open FCS case may be given to the FCS Worker. Staff should be responsive to the mandated reporter, and if appropriate, let him/her know the referral has been received. However, in these situations, it is not necessary to follow the policy for "M" referrals. Information received from the mandated reporter should be used in working with the family.

In situations of sibling/adolescent sex abuse, in addition to the above steps, staff shall:

- G. Complete an assessment with the family to:
 - ensure the victim is safe;

- ensure that future risk to the victim is reduced;
- identify services needed by the abuser and the victim; and
- provide Family-Centered Services (FCS) as appropriate, and/or provide information and referral services to the family.

1.4 NEWBORN CRISIS ASSESSMENTS

These are transmitted as "A" referrals. Receive request from a physician/health care provider to conduct a "Newborn Crisis Assessment." Although this is not a child abuse/neglect report, county staff will handle the referral as an emergency.

Related Subject: Chapter 5.4, of this section, Newborn Crisis Assessment.

If a physician/health care provider makes a referral which contains information regarding signs of drug involvement of an infant, but does not allege child abuse/neglect, CA/N Hotline Unit will not accept a CA/N report, but will make the caller aware of DHSS as a resource and offer to transfer the call to the DHSS toll-free number (800-877-6246). CANHU will make the caller aware that DHSS "Service Coordinators" will involve CD in the planning and provision of services.

1.5 NON-CARETAKER REFERRALS

These are taken as "N" referrals. Reporters alleging abuse of a child under 18 years of age, where there is no care, custody, or control are advised that the CA/N Hotline Unit will make a referral to the county office, but that it is not a child abuse/neglect report. The CA/N Hotline Unit will encourage the reporter to call the appropriate agency, such as the juvenile office or law enforcement.

If the identified alleged perpetrator is a juvenile, the referral is sent to the juvenile office, by the county office. If an adult, the county office should refer the information to local law enforcement.

In situations of sibling/adolescent sex abuse, staff shall:

- a) Contact the reporter (unless the report came directly to the county office) to determine the current situation, obtain additional information, and identify with the reporter an intervention strategy and time frame for contact with the family. If the reporter can not be contacted, initiate contact with the family;
- b) Initiate contact with the family to assure the safety of the child (acceptance of services by the family is on a voluntary basis for Non-Caretaker Referrals);
- c) Complete an assessment with the family to:

- Ensure the victim is safe;
 - Ensure that future risk to the victim is reduced;
 - Identify services needed by the abuser and the victim; and
- d) Provide services (FCS) as appropriate, and/or provide information and referral services to the family.

1.6 PREVENTIVE SERVICE REFERRALS

These are taken as "P" referrals. The CA/N Hotline Unit will inform the permissive reporter that a referral is being sent to the local office, but that it is not a child abuse/neglect report.

Preventive Service Referrals include:

- (a) Information only (open FCS case, pending CA/N investigation);
- (b) Referrals for services to prevent CA/N:
 - Family requests services;
 - Caretaker is ill, hospitalized, etc., and no appropriate child care plan;
 - Caretaker requesting placement of child but no CA/N;
 - Caretaker or child is suicidal;
 - Child exhibiting extreme maladaptive behavior; or
 - Domestic violence present in home and child is witness to violent episodes.

1.7 MISCELLANEOUS REFERRALS

1.7.1 MISSING CHILD

If a child is reported missing, advise caller that no report is being taken and suggest contacting the local law enforcement agency or the Missouri State Highway Patrol.

1.7.2 LICENSING VIOLATIONS

Refer complaint to Child Care Licensing Unit, if reporter is reporting a Child Care Licensing rule violation and not child abuse/neglect.

Make a Non-Caretaker or Preventive Service Referral to the Residential Program Unit if licensing or criminal violations are reported, but are not child abuse/neglect reports.

1.7.3 DEATH OR SERIOUS INJURY

Notify immediately Division Director through supervisory channels of the death or serious injury of a child or of a complaint of medical neglect of a handicapped infant in a hospital or health care facility.

Obtain sufficient information to file a report for investigation, if a report is warranted.

Related Subject: Chapter 4, of this section, Attachment A, Investigations Involving Reported Injuries.
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Search and note information from data base concerning participation in Department of Social Services programs, income maintenance, food stamps, Family-Centered Services, alternative care, day care, foster parent, adoptive parent or prior abuse/neglect involvement if no DCN is found. (Those with DCNs are searched automatically in the system.)

1.7.4 NON-CA/N RELATED CHILD FATALITY REFERRALS

With the passage of SB 757, Child Fatality Review Panels shall review all deaths of children under the age of eighteen years. "In addition, the panel may review at its own discretion any child death reported to it by the Medical Examiner or Coroner, even if it does not meet criteria for review as set forth by The Department (RSMo 210.192.3)."

STAT is mandated to gather data from local Child Fatality Review Panels, then submit an annual report of its findings and recommendations. The "F" referral was developed to assist STAT in the receiving of Non-CA/N related child fatalities in a timely manner.

Pursuant to SB 757, all Non-CA/N related child fatalities are to be reported to CANHU by medical examiners or coroners. This information will be forwarded to STAT. The local county in which the fatality occurs will receive a courtesy copy of the "F" Referral. County staff members are not required to update the CA/N Automated System regarding these referrals.

1.7.5 DUPLICATE REPORTS

CA/N reports that meet all of the following criteria will be considered duplicate reports:

- Involves a specific incident;
- Incidents occurred on the same date;
- Contains the same basic allegations;
- Includes the same participants – victim(s), parent(s), and alleged perpetrator(s);

The Hotline Unit will continue to combine duplicate reports received within 24 hours of the initial report. **For those received more than 24 hours after the initial report and determined to meet all of the criteria listed above, county staff will take the following action:**

- Document the decision on the duplicate report CA/N-1, including the initial report incident number. The incident number to be retained is that which represents the earliest report. This will usually be the lowest number.
- Transfer any new information from the duplicate report to the initial report, including reporter's name, if known.
- Submit to the Children's Service Supervisor for review.
- Following review of the documentation and decision, the supervisor will sign both the initial CA.N-1 and the duplicate report CA.N-1, indicating approval.
- The county office will then request that the Hotline Unit delete the duplicate report. Written notification will be submitted to the Hotline Unit documenting the request. Documentation will include the incident number to be retained, as well as the incident number to be deleted.
- Place the duplicate report CA/N-1 and a copy of the notification submitted to the Hotline Unit in the initial incident file following completion of the above steps.

1.8 Determine Most Appropriate County for Investigation

Before a report is sent to a county the following criteria should be considered:

- A. Assign to county where child is located and incident has occurred if both factors are known and the child is not likely to leave present location.
- B. Assign to county of child's location if location and incident are in different counties and child is not likely to leave present location.
- C. Assign to county of child's present location if child's residence is unknown or location will not change within the next 24 hours.
- D. Assign to county of child's residence when he/she is hospitalized at the time of the CA/N report.
- E. Assign to Out-of-Home Investigation (OHI) Worker when the institution/staff person is named as alleged perpetrator for reports involving schools, residential facilities, foster parents or child care centers, which are licensed, exempt, or registered. The OHI Worker may request the local Worker to see the child in emergency situations or when the child must be seen before an OHI Worker can reasonably be expected to see the child.

NOTE: All children under Jackson County jurisdiction are subject to the requirements of the Jackson County Consent Decree. Because of the Consent Decree, the Division will accept and investigate allegations of inappropriate discipline by foster parents. These are allegations, which do not meet the criteria for CA/N reports, but indicate inappropriate discipline by the foster parent on the foster child.

- F. Assign to OHI if foster parent/member of family is named as alleged perpetrator and victim is LS1 child.
- G. Use the following guidelines where one or more of the factors of location, incident, or residence is out of the State of Missouri:
 - Accept report where child's residence and either incident or location is in Missouri. Assign report to county of child's location - or child's residence if location is out of state;
 - Refer reporter to other state if child's location and incident are in another state, even when residence is in Missouri.

NOTE: Accept all out of state reports from Missouri mandated reporters for tracking and referral to the appropriate state. These will not be investigated by CD staff.

- Accept report where residence is in another state as long as child's location or incident or both are within Missouri. Assign report in accordance with the above steps.

H. Assign report to juvenile officer if the relationship of the subject of a report to the Children's Division is such that a conflict of interest may occur.

Related Subject: Section 2, Chapter 1, Attachment B, Investigations Involving Conflict of Interest.

- Determine appropriate juvenile office using the above steps.

Notify Area Director if Juvenile Office does not accept a report concerning an agency employee.

- Arrange for investigation to be conducted by CSW from county other than that of employee.
 - Advise the CA/N Hotline Unit which county or CSW will conduct the investigation.
 - Reassign report and transmit to county or CSW designated.
- I. Enter information into automated system.
- J. Advise the CA/N Hotline Unit immediately if county of assignment is incorrect, or a conflict of interest exists.

Related Subject: Section 2, Chapter 1, Attachment C, Transfer of Reports.

- Determine appropriate county office using steps 1.8 above;
- Update automated system in accordance with reassignment; and
- Transmit report to current county designee.

NOTE: The CA/N Hotline Unit will have final authority to determine whether an investigation is an emergency and to determine the most appropriate county to be assigned report. The county office can determine that a report is an emergency even though not designated by the CA/N Hotline Unit.

K. Notify the appropriate licensing or administrative authority, or county director, if abuse or neglect involves the following:

- A licensed child care facility or a person caring for more than four (4) unrelated children;
- Report is received on a child care provider's own child(ren);
- Residential treatment facility;
- Department of Mental Health facility;
- Division of Youth Services facility;
- Juvenile court approved home or facility; or
- A Division licensed foster home and foster child.

NOTE: Generally contacts relating to the above (with the exception of reports received on a child care provider's own child(ren), will be handled by the out-of-home investigation unit.

MEMORANDA HISTORY: CD04-01